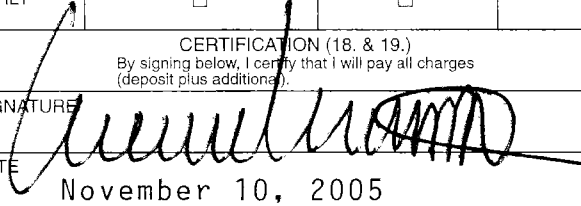
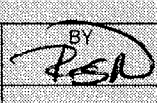


AO435 (Rev. 1/90)		ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS		FOR COURT USE ONLY DUE DATE:	
<b>TRANSCRIPT ORDER</b>					
<i>Read Instructions on Back.</i>					
1. NAME Howard Trapp Incorporated		2. PHONE NUMBER (671) 477-7000		3. DATE November 10, 2005	
4. MAILING ADDRESS 200 Saylor Building; 139 Chalan Santo Papa		5. CITY Hagatna		6. STATE Guam	7. ZIP CODE 96910
8. CASE NUMBER CR 04-00055		9. JUDICIAL OFFICIAL Carter/George		DATES OF PROCEEDINGS	
		10. FROM 5/4/05		11. TO 10/5/05	
12. CASE NAME USA vs. Hsin-Yu Chen		13. CITY Hagatna		14. STATE Guam	
15. ORDER FOR					
<input checked="" type="checkbox"/> APPEAL		<input checked="" type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT	
<input type="checkbox"/> NON-APPEAL		<input type="checkbox"/> CIVIL		<input type="checkbox"/> IN FORMA PAUPERIS	
				<input type="checkbox"/> BANKRUPTCY	
				<input type="checkbox"/> OTHER (Specify)	
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)					
PORTIONS		DATE(S)		PORTION(S)	
<input checked="" type="checkbox"/> VOIR DIRE		5/4/05		<input checked="" type="checkbox"/> TESTIMONY (Specify Witness)	
<input checked="" type="checkbox"/> OPENING STATEMENT (Plaintiff)		5/4/05		All	
<input checked="" type="checkbox"/> OPENING STATEMENT (Defendant)		5/4/05			
<input checked="" type="checkbox"/> CLOSING ARGUMENT (Plaintiff)		5/5/05		<input checked="" type="checkbox"/> PRE-TRIAL PROCEEDING (Specify)	
<input checked="" type="checkbox"/> CLOSING ARGUMENT (Defendant)		5/5/05		Any pre-trial	
<input type="checkbox"/> OPINION OF COURT				conference	
<input checked="" type="checkbox"/> JURY INSTRUCTIONS		5/5/05		<input checked="" type="checkbox"/> OTHER (Specify)	
<input checked="" type="checkbox"/> SENTENCING		10/5/05		The entire trial	
<input type="checkbox"/> BAIL HEARING				(everything)	
				5/4, 5/05	
				5/4/05	
				5/4, 5, 6/05	
17. ORDER					
CATEGORY	ORIGINAL (Includes Free Copy for the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
ORDINARY	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	NO. OF COPIES		
EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL	
18. SIGNATURE 				PROCESSED BY	
19. DATE November 10, 2005				PHONE NUMBER	
TRANSCRIPT TO BE PREPARED BY				COURT ADDRESS	
ORDER RECEIVED		DATE 11/10/05	BY 	DEPOSIT PAID	
DEPOSIT PAID				TOTAL CHARGES	
TRANSCRIPT ORDERED				LESS DEPOSIT	
TRANSCRIPT RECEIVED				TOTAL REFUNDED	
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL DUE	
PARTY RECEIVED TRANSCRIPT					

FILED

DISTRICT COURT OF GUAM

NOV 10 2005 